

**Work Order ID 147759**

June 13, 2016 11:45:42 AM

**\*147759\****Ship July 8*

Page 1

Item ID: D350-607-547

Accept

**\*N900040100\***

Setup Start

**\*NS1\***

Revision ID:

Stop

**\*NS2\***

Item Name: QR Heli-Utility-Basket™, Short, Light Lid, Spacepod™ &amp; Squirrel Cheek Comp., LH/RH

Start Date: 6/29/2016 Start Qty: 1.00

**\*1\***

Cust Item ID:

Required Date: 7/8/2016 Req'd Qty: 1.00

**\*1\***

Customer:

Reference:

Approvals: Process Plan: SIA Date: 6/13/16 Tooling: \_\_\_\_\_ Date: \_\_\_\_\_  
QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Run Start

**\*NR1\***

Stop

**\*NR2\***

| Sequence ID/<br>Work Center ID | Operation<br>Description                                     | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|--------------------------------------------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| <b>Draw Nbr</b>                | <b>Revision Nbr</b>                                          |                      |         |        |              |               |               |                  |                |
| D350-607-3                     | D                                                            |                      |         |        |              |               |               |                  |                |
| DSI9699                        | A                                                            |                      |         |        |              |               |               |                  |                |
| 100                            | Document Control                                             | 0.00                 |         |        |              |               |               |                  |                |
| <b>*100*</b>                   | DOCUMENT CONTROL                                             |                      |         |        |              |               |               |                  |                |
| DC                             | Memo                                                         | 0.00                 |         |        |              |               |               |                  |                |
| Doc.Control -USB or Paperwork  | Photocopy bluefile & type labels per PPP D350-607-547 CHG008 |                      |         |        |              |               |               |                  |                |
| 140                            | Pick Kit                                                     | 0.00                 |         |        |              |               |               |                  |                |
| <b>*140*</b>                   |                                                              |                      |         |        |              |               |               |                  |                |
| Packaging                      | Memo                                                         | 0.00                 |         |        |              |               |               |                  |                |
| Packaging                      |                                                              |                      |         |        |              |               |               |                  |                |

DAS  
27  
9-89

JUN 22 2016

DAS  
28  
9-89  
JUN 16 2016  
DAS  
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9-89

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

|                                                              |                                                |                                                                                                                                                                                    |                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                               |  |                                                                                                              |  |  |
|--------------------------------------------------------------|------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|--|--------------------------------------------------------------------------------------------------------------|--|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ |                                                | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Suspected Unapproved <input type="checkbox"/> |                                                            | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>             Skid-tube <input type="checkbox"/><br/>             Machining <input type="checkbox"/><br/>             Thermoforming <input type="checkbox"/><br/>             Large Fab <input type="checkbox"/> </div> <div>             Cross tube <input type="checkbox"/><br/>             Small Fab <input type="checkbox"/><br/>             Finishing <input type="checkbox"/><br/>             Composite <input type="checkbox"/> </div> <div>             Water Jet <input type="checkbox"/><br/>             Prod. Eng. Coord. <input type="checkbox"/><br/>             Rec/Store/Packaging <input type="checkbox"/><br/>             Supplier <input type="checkbox"/> </div> <div>             Engineering <input type="checkbox"/><br/>             Quality <input type="checkbox"/><br/>             Other <input type="checkbox"/> </div> </div> |                                               |  |                                                                                                              |  |  |
| Date :                                                       |                                                | Step #:                                                                                                                                                                            |                                                            | QTY Effective :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                               |  | <b>MRB (QSI042) Approval</b><br><br><div style="border: 1px solid black; height: 100px; width: 100%;"></div> |  |  |
| Description Work Order Deviation                             |                                                |                                                                                                                                                                                    |                                                            | Disposition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                               |  |                                                                                                              |  |  |
|                                                              |                                                |                                                                                                                                                                                    |                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                               |  | Completed By                                                                                                 |  |  |
|                                                              |                                                |                                                                                                                                                                                    |                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                               |  | Lead hand / Supervisor Approval Verification                                                                 |  |  |
|                                                              |                                                |                                                                                                                                                                                    |                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                               |  | QC / QA Coordinator Approval                                                                                 |  |  |
| Root Cause                                                   |                                                | FAULT CATEGORY                                                                                                                                                                     |                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                               |  |                                                                                                              |  |  |
| Environment <input type="checkbox"/>                         | No Re-verification <input type="checkbox"/>    | Pressure/Forced <input type="checkbox"/>                                                                                                                                           | Temperature/Cure <input type="checkbox"/>                  | Power Loss/Surge <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Positioned Wrong <input type="checkbox"/>     |  |                                                                                                              |  |  |
| Design <input type="checkbox"/>                              | Operator <input type="checkbox"/>              | Bending <input type="checkbox"/>                                                                                                                                                   | Set-up <input type="checkbox"/>                            | Folio/Program <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Outside Dimensions <input type="checkbox"/>   |  |                                                                                                              |  |  |
| Doc/Data <input type="checkbox"/>                            | Offset/Setup <input type="checkbox"/>          | Centre Not Concentric <input type="checkbox"/>                                                                                                                                     | BOM/Route <input type="checkbox"/>                         | Grain <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Over/Under tolerance <input type="checkbox"/> |  |                                                                                                              |  |  |
| Equip/Tooling <input type="checkbox"/>                       | Supplier <input type="checkbox"/>              | Cracks <input type="checkbox"/>                                                                                                                                                    | Broken/Damage/Defect <input type="checkbox"/>              | Weld <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Part Incorrect <input type="checkbox"/>       |  |                                                                                                              |  |  |
| Handling/Pre <input type="checkbox"/>                        | Training <input type="checkbox"/>              | Crimp/Kink/Ripple/Wave <input type="checkbox"/>                                                                                                                                    | Inspection Incomplete/Unqualified <input type="checkbox"/> | Wrong Stock Pulled <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Part Lost/Missing <input type="checkbox"/>    |  |                                                                                                              |  |  |
| Material <input type="checkbox"/>                            | Use for Testing <input type="checkbox"/>       | Cuffs <input type="checkbox"/>                                                                                                                                                     | Contamination <input type="checkbox"/>                     | Out of Sequence <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Part Moved <input type="checkbox"/>           |  |                                                                                                              |  |  |
| Internal Transport <input type="checkbox"/>                  | Poor Information <input type="checkbox"/>      | Crushing <input type="checkbox"/>                                                                                                                                                  | Countersink <input type="checkbox"/>                       | Off-set <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Drawing <input type="checkbox"/>              |  |                                                                                                              |  |  |
| Tribal Knowledge <input type="checkbox"/>                    | Rushing <input type="checkbox"/>               | Heat Treat <input type="checkbox"/>                                                                                                                                                | Cut Too Short <input type="checkbox"/>                     | Mislabeled <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Finish <input type="checkbox"/>               |  |                                                                                                              |  |  |
| LOA <input type="checkbox"/>                                 | Product Improvement <input type="checkbox"/>   | Wave/Twist in Tube <input type="checkbox"/>                                                                                                                                        | Instructions Incomplete/Unclear <input type="checkbox"/>   | Fit/Function <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Misread <input type="checkbox"/>              |  |                                                                                                              |  |  |
| Substation <input type="checkbox"/>                          | Process Improvement <input type="checkbox"/>   | Marks/Chatter <input type="checkbox"/>                                                                                                                                             | Drill Holes <input type="checkbox"/>                       | Misaligned/off center <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Turning Sequence <input type="checkbox"/>     |  |                                                                                                              |  |  |
| Past Expiry Date <input type="checkbox"/>                    | Manufacturing Process <input type="checkbox"/> | <b>OTHER :</b> _____                                                                                                                                                               |                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                               |  |                                                                                                              |  |  |
| Misidentified <input type="checkbox"/>                       | Past Due <input type="checkbox"/>              |                                                                                                                                                                                    |                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                               |  |                                                                                                              |  |  |

**Work Order ID 147759**

June 13, 2016 11:45:42 AM

**\*147759\***

Page 2

Item ID: D350-607-547

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Item Name: QR Heli-Utility-Basket™, Short, Light Lid, Spacepod™ &amp; Squirrel Cheek Comp., LH/RH

Stop **\*NS2\***Start Date: 6/29/2016 Start Qty: 1.00 **\*1\***

Cust Item ID:

Required Date: 7/8/2016 Req'd Qty: 1.00 **\*1\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***

| Sequence ID/<br>Work Center ID | Operation<br>Description                                                   | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|----------------------------------------------------------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| 150                            | QC4- 100% Inspect kits for completeness                                    | 0.00                 |         |        |              |               |               |                  |                |
| <b>*150*</b>                   |                                                                            |                      |         |        |              |               |               |                  |                |
| QC                             | Memo                                                                       | 0.01                 |         |        |              |               |               |                  |                |
| Quality Control                |                                                                            |                      |         |        |              |               |               |                  |                |
|                                |                                                                            |                      |         |        |              |               |               |                  |                |
|                                |                                                                            |                      |         |        |              |               |               |                  |                |
|                                |                                                                            |                      |         |        |              |               |               |                  |                |
| 160                            |                                                                            | 0.00                 |         |        |              |               |               |                  |                |
| <b>*160*</b>                   | Packaging                                                                  |                      |         |        |              |               |               |                  |                |
| Packaging                      | Memo                                                                       | 0.00                 |         |        |              |               |               |                  |                |
| Packaging                      | Identify and pack for shipping as per PPP D350-607-547<br>Location ; FG096 |                      |         |        |              |               |               |                  |                |
|                                |                                                                            |                      |         |        |              |               |               |                  |                |
|                                |                                                                            |                      |         |        |              |               |               |                  |                |
|                                |                                                                            |                      |         |        |              |               |               |                  |                |
| 170                            | QC21- Final Inspection - Work Order Release                                | 0.00                 |         |        |              |               |               |                  |                |
| <b>*170*</b>                   |                                                                            |                      |         |        |              |               |               |                  |                |
| QC                             | Memo                                                                       | 0.02                 |         |        |              |               |               |                  |                |
| Quality Control                |                                                                            |                      |         |        |              |               |               |                  |                |

DAS  
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9-89

JUN 22 2016

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9-89

JUN 22 2016

16/7/4

Su 6/30/16

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |  |                       |                                              |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|-----------------------|----------------------------------------------|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Suspected Unapproved <input type="checkbox"/> |  | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>             Skid-tube <input type="checkbox"/><br/>             Machining <input type="checkbox"/><br/>             Thermoforming <input type="checkbox"/><br/>             Large Fab <input type="checkbox"/> </div> <div>             Cross tube <input type="checkbox"/><br/>             Small Fab <input type="checkbox"/><br/>             Finishing <input type="checkbox"/><br/>             Composite <input type="checkbox"/> </div> <div>             Water Jet <input type="checkbox"/><br/>             Prod. Eng. Coord. <input type="checkbox"/><br/>             Rec/Store/Packaging <input type="checkbox"/><br/>             Supplier <input type="checkbox"/> </div> <div>             Engineering <input type="checkbox"/><br/>             Quality <input type="checkbox"/><br/>             Other <input type="checkbox"/> </div> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |                       |                                              |  |
| Date :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | Step #:                                                                                                                                                                            |  | QTY Effective :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |  | MRB (QS1042) Approval |                                              |  |
| Description Work Order Deviation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                    |  | Disposition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |                       | Completed By                                 |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |  |                       | Lead hand / Supervisor Approval Verification |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |  |                       | QC / QA Coordinator Approval                 |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |  |                       |                                              |  |
| Root Cause                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                    |  | FAULT CATEGORY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |  |                       |                                              |  |
| <div style="display: flex;"> <div style="flex: 1;">           Environment <input type="checkbox"/><br/>           Design <input type="checkbox"/><br/>           Doc/Data <input type="checkbox"/><br/>           Equip/Tooling <input type="checkbox"/><br/>           Handling/Pre <input type="checkbox"/><br/>           Material <input type="checkbox"/><br/>           Internal Transport <input type="checkbox"/><br/>           Tribal Knowledge <input type="checkbox"/><br/>           LOA <input type="checkbox"/><br/>           Substation <input type="checkbox"/><br/>           Past Expiry Date <input type="checkbox"/><br/>           Misidentified <input type="checkbox"/> </div> <div style="flex: 1;">           No Re-verification <input type="checkbox"/><br/>           Operator <input type="checkbox"/><br/>           Offset/Setup <input type="checkbox"/><br/>           Supplier <input type="checkbox"/><br/>           Training <input type="checkbox"/><br/>           Use for Testing <input type="checkbox"/><br/>           Poor Information <input type="checkbox"/><br/>           Rushing <input type="checkbox"/><br/>           Product Improvement <input type="checkbox"/><br/>           Process Improvement <input type="checkbox"/><br/>           Manufacturing Process <input type="checkbox"/><br/>           Past Due <input type="checkbox"/> </div> </div> |  |                                                                                                                                                                                    |  | <div style="display: flex;"> <div style="flex: 1;">           Pressure/Forced <input type="checkbox"/><br/>           Bending <input type="checkbox"/><br/>           Centre Not Concentric <input type="checkbox"/><br/>           Cracks <input type="checkbox"/><br/>           Crimp/Kink/Ripple/Wave <input type="checkbox"/><br/>           Cuffs <input type="checkbox"/><br/>           Crushing <input type="checkbox"/><br/>           Heat Treat <input type="checkbox"/><br/>           Wave/Twist in Tube <input type="checkbox"/><br/>           Marks/Chatter <input type="checkbox"/> </div> <div style="flex: 1;">           Temperature/Cure <input type="checkbox"/><br/>           Set-up <input type="checkbox"/><br/>           BOM/Route <input type="checkbox"/><br/>           Broken/Damage/Defect <input type="checkbox"/><br/>           Inspection Incomplete/Unqualified <input type="checkbox"/><br/>           Contamination <input type="checkbox"/><br/>           Countersink <input type="checkbox"/><br/>           Cut Too Short <input type="checkbox"/><br/>           Instructions Incomplete/Unclear <input type="checkbox"/><br/>           Drill Holes <input type="checkbox"/> </div> <div style="flex: 1;">           Power Loss/Surge <input type="checkbox"/><br/>           Folio/Program <input type="checkbox"/><br/>           Grain <input type="checkbox"/><br/>           Weld <input type="checkbox"/><br/>           Wrong Stock Pulled <input type="checkbox"/><br/>           Out of Sequence <input type="checkbox"/><br/>           Off-set <input type="checkbox"/><br/>           Misabeled <input type="checkbox"/><br/>           Fit/Function <input type="checkbox"/><br/>           Misaligned/off center <input type="checkbox"/> </div> <div style="flex: 1;">           Positioned Wrong <input type="checkbox"/><br/>           Outside Dimensions <input type="checkbox"/><br/>           Over/Under tolerance <input type="checkbox"/><br/>           Part Incorrect <input type="checkbox"/><br/>           Part Lost/Missing <input type="checkbox"/><br/>           Part Moved <input type="checkbox"/><br/>           Drawing <input type="checkbox"/><br/>           Finish <input type="checkbox"/><br/>           Misread <input type="checkbox"/><br/>           Turning Sequence <input type="checkbox"/> </div> </div> |  |  |                       |                                              |  |
| OTHER : <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |  |                       |                                              |  |

# Picklist Print

June 13, 2016 11:45:46 AM

Page 1

Work Order ID: 147759

**\*147759\***

Parent Item: D350-607-547

**\*D350-607-547\***

Parent Item Name: QR Heli-Utility-Basket™, Short, Light Lid, Spacepod™ & Squirrel Cheek Comp., LH/RH

Start Date: 6/29/2016

Required Date: 7/8/2016

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP REV:A 10-08-19 AS PER REV.A DD VRF BY:EC IPP  
REV:B 12.03.06 AS PER ECN12-535 DD VRF:EC IPP REV:C  
12.07.24 AS PER ECN 12-610 DD VRF:EC IPP Rev:D 13.07.08 as  
per CHG005 (ECN13-582) DD vrf:JLM IPP REV:E 13.08.21 CHG006 / ECN  
13-624 DD VRF:JLM IPP REV:F 14.06.10 AS PER ECN14-572 DD  
VRF:JLM

| Component Item ID/<br>Item Name                                                                                      | Replacement<br>Item ID | Mfg/<br>Purch | Bin<br>Item | Primary<br>Location | Last<br>Location | Route<br>Seq ID | Unit of<br>Measure | Qty on<br>Hand | Qty per Kit | Total<br>Qty    | Qty<br>Issued | Date<br>Issued | Status            |
|----------------------------------------------------------------------------------------------------------------------|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|-----------------|---------------|----------------|-------------------|
| D4917-332<br><b>*D4917-332*</b><br>Placard, Max Load                                                                 |                        | Manufactured  | No          |                     |                  | 140             | Each               | 6.0000         | 1           | 1               |               |                | DAS<br>28<br>9-89 |
|                                                                                                                      |                        |               |             | <u>Location</u>     |                  |                 |                    | <u>Loc Qty</u> |             | <u>Loc Code</u> |               |                |                   |
|                                                                                                                      |                        |               |             | ST137               |                  |                 |                    | 6              |             |                 |               |                |                   |
|                                                                                                                      |                        |               |             | 141698              |                  |                 |                    | 6              |             |                 |               |                |                   |
| D350-607-511<br><b>*D350-607-511*</b><br>Quick Release Basket and Long Cargo Tube Mounting Provisions, Fits LH or RH |                        | Manufactured  | No          |                     |                  | 140             | Each               | 2.0000         | 1           | 1               |               |                | DAS<br>28<br>9-89 |
|                                                                                                                      |                        |               |             | <u>Location</u>     |                  |                 |                    | <u>Loc Qty</u> |             | <u>Loc Code</u> |               |                |                   |
|                                                                                                                      |                        |               |             | FG128               |                  |                 |                    | 2              |             |                 |               |                |                   |
|                                                                                                                      |                        |               |             | 145426              |                  |                 |                    | 2              |             |                 |               |                |                   |
| D2690-6<br><b>*D2690-6*</b><br>Lanyard                                                                               |                        | Manufactured  | No          |                     |                  | 140             | Each               | 40.0000        | 1           | 1               |               |                | DAS<br>28<br>9-89 |
|                                                                                                                      |                        |               |             | <u>Location</u>     |                  |                 |                    | <u>Loc Qty</u> |             | <u>Loc Code</u> |               |                |                   |
|                                                                                                                      |                        |               |             | ST009               |                  |                 |                    | 40             |             |                 |               |                |                   |
|                                                                                                                      |                        |               |             | 144944              |                  |                 |                    | 1              |             |                 |               |                |                   |
|                                                                                                                      |                        |               |             | 146036              |                  |                 |                    | 21             |             |                 |               |                |                   |
|                                                                                                                      |                        |               |             | 146658              |                  |                 |                    | 18             |             |                 |               |                |                   |

DAS  
6  
9-89

JUN 16 2016

# Picklist Print

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Page 2

Work Order ID: 147759

**\*147759\***

Parent Item: D350-607-547

**\*D350-607-547\***

Parent Item Name: QR Heli-Utility-Basket™, Short, Light Lid, Spacepod™ & Squirrel Cheek Comp., LH/RH

Start Date: 6/29/2016

Required Date: 7/8/2016

D3912-041

Manufactured No

140 Each

8.0000

Start Qty: 1.00

Required Qty: 1.00

**\*D3912-041\***

Eyebolt Receiver Assy

DAS  
28  
9-89

Location

Loc Qty

Loc Code

ST057

8

145537

8

D4032-043

Manufactured No

140 Each

0.0000

**\*D4032-043\***

Short Basket Assembly, Light Lid (350)

DAS  
28  
9-89

Location

Loc Qty

Loc Code

ST078

8

138955

8

D4151-041

Manufactured No

140 Each

9.0000

**\*D4151-041\***

Basket Fwd Hardpoint Assembly, Lower

DAS  
28  
9-89

Location

Loc Qty

Loc Code

ST0087

4

143336

4

ST087

1

143335

1

ST090A

4

145589

4

DAS  
28  
9-89

DAS  
28  
9-89

DAS  
28  
9-89

DAS  
28  
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Work Order ID: 147759

**\*147759\***

Parent Item: D350-607-547

**\*D350-607-547\***

Parent Item Name: QR Heli-Utility-Basket™, Short, Light Lid, Spacepod™ & Squirrel Cheek Comp., LH/RH

Start Date: 6/29/2016

Required Date: 7/8/2016

D4151-043

Manufactured No

140 Each

Start Qty: 1.00  
11.0000 1 1

Required Qty: 1.00

**\*D4151-043\***

Basket Fwd Hardpoint Assembly, Upper

\*\*

DAS 28 9-89  
DAS 28 9-89

| Location | Loc Qty | Loc Code |
|----------|---------|----------|
| ST088    | 2       |          |
| 143358   | 2       |          |
| ST090A   | 9       |          |
| 143359   | 4       |          |
| 146060   | 5       |          |

DAS 28 9-89

D4150-041

Manufactured No

140 Each

9.0000 1 1

**\*D4150-041\***

Attachment Arm Assembly

\*\*

DAS 28 9-89  
DAS 28 9-89

| Location | Loc Qty | Loc Code |
|----------|---------|----------|
| ST087    | 6       |          |
| 143344   | 3       |          |
| 143345   | 3       |          |
| ST090A   | 3       |          |
| 145783   | 3       |          |

DAS 28 9-89

AN4-13A

Purchased No

140 Each

692.0000 6 6

**\*AN4-13A\***

Bolt

\*\*

DAS 28 9-89

| Location | Loc Qty | Loc Code |
|----------|---------|----------|
| FG       | 20      |          |
| 122808   | 20      |          |
| GA       | 60      |          |
| m134167  | 36      |          |
| m134634  | 24      |          |
| over003  | 500     |          |
| m134852  | 400     |          |
| m134943  | 100     |          |
| ST344    | 112     |          |
| m134754  | 112     |          |

DAS 28 9-89

DAS 28 9-89

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Page 3

# Picklist Print

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Page 5

Work Order ID: 147759

**\*147759\***

Parent Item: D350-607-547

**\*D350-607-547\***

Parent Item Name: QR Heli-Utility-Basket™, Short, Light Lid, Spacepod™ & Squirrel Cheek Comp., LH/RH

Start Date: 6/29/2016

Required Date: 7/8/2016

MS21042L4 Purchased No 140 Each 2,128.000 6 6 Start Qty: 1.00 Required Qty: 1.00

**\*MS21042L4\***

Locknut

**\*\***

DAS  
6 28  
9-89 9-89

DAS  
28  
9-89

| Location | Loc Qty | Loc Code |
|----------|---------|----------|
| GA       | 181     |          |
| m133769  | 181     |          |
| OVER007  | 1500    |          |
| m134861  | 1000    |          |
| m134955  | 500     |          |
| ST303    | 353     |          |
| m134762  | 353     |          |
| ST305    | 94      |          |
| m130922  | 94      |          |

MS24665-151

Purchased No

140 Each

113.0000

1 1

**\*MS24665-151\***

Cotter Pin

**\*\***

DAS  
6 28  
9-89 9-89

DAS  
28  
9-89

| Location | Loc Qty | Loc Code |
|----------|---------|----------|
| GA       | 64      |          |
| m128401  | 64      |          |
| ST289    | 49      |          |
| m134294  | 49      |          |

NAS1515H4L

Purchased No

140 Each

261.0000

2 2

**\*NAS1515H4L \***

Washer

**\*\***

DAS  
6 28  
9-89 9-89

132767

DAS  
28  
9-89

| Location | Loc Qty | Loc Code |
|----------|---------|----------|
| FG       | 23      |          |
| 103691   | 3       |          |
| m132189  | 20      |          |
| ST260    | 238     |          |
| m133483  | 138     |          |
| m134376  | 100     |          |

JUN 16 2016

June 13, 2016 11:45:46 AM

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Page 5



# Picklist Print

Page 6

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Work Order ID: 147759

**\*147759\***

Parent Item: D350-607-547

**\*D350-607-547\***

Parent Item Name: QR Heli-Utility-Basket™, Short, Light Lid, Spacepod™ & Squirrel Cheek Comp., LH/RH

Start Date: 6/29/2016

Required Date: 7/8/2016

NAS1149F0432P Purchased No 140 Each 1,768.000 12 12

Start Qty: 1.00

Required Qty: 1.00

**\*NAS1149F0432P\***

WASHER

DAS  
28  
9-89

Location

Loc Qty

Loc Code

|         |      |  |
|---------|------|--|
| ST260a  | 1000 |  |
| M134955 | 1000 |  |
| ST262   | 647  |  |
| M134502 | 647  |  |
| st268   | 121  |  |
| M132677 | 121  |  |

\*\*

DAS  
28  
9-89  
DAS  
6  
9-89

NAS1149C0463R

Purchased

No

140 Each

312.0000

3

3

**\*NAS1149C0463R\***

Washer

DAS  
28  
9-89

Location

Loc Qty

Loc Code

|         |     |  |
|---------|-----|--|
| FP001   | 70  |  |
| m127306 | 70  |  |
| ST260a  | 200 |  |
| m134167 | 200 |  |
| ST266   | 42  |  |
| m133077 | 42  |  |

\*\*

DAS DAS  
6 28  
9-89 9-89

JUN 16 2016

# DART SERVICE INSTRUCTION

TO AMEND INSTALLATION INSTRUCTIONS D350-607-3 Rev.D,  
INSTALLATION INSTRUCTIONS D350-607-4 Rev. C AND  
INSTRUCTIONS FOR CONTINUED AIRWORTHINESS ICA-D350-607 REV. 6

REF TCCA STC: SH94-14  
REF FAA STC: SR00213NY  
REF EASA STC: EASA.10016996  
REF BRAZILIAN STC: 2007S03-03/-04/-05/-06

147759  
SH 6/13/16

## 1.0 PURPOSE

This service instruction provides parts and instructions to facilitate installation of forward Basket Strut for customers that have purchased: D350-607-501 Conversion Kit @ CHG 004, D350-607-511 Quick Release Basket Mounting Kit @ CHG 004, D350-607-541 @ CHG 006, D350-607-543 @ CHG 007, D350-607-545 @ CHG 006, D350-607-547 @ CHG 007 Heli-Utility-Baskets as well as the D350-607-431 Strut Retrofit Kit and the D350-607-641 Long Cargo Tube @ CHG 001.

## 2.0 PARTS LIST:

Modify the quantities for D3910-5 and add D3910-7 as follows:

| QTY<br>-541 | QTY<br>-543 | QTY<br>-545 | QTY<br>-547 | QTY<br>-511 | QTY<br>-501 | PART NUMBER  | DESCRIPTION                                          |
|-------------|-------------|-------------|-------------|-------------|-------------|--------------|------------------------------------------------------|
| X           |             |             |             |             |             | D350-607-541 | HELI-UTILITY-BASKET @ CHG 007 OR LATER               |
|             | X           |             |             |             |             | D350-607-543 | HELI-UTILITY-BASKET @ CHG 008 OR LATER               |
|             |             | X           |             |             |             | D350-607-545 | HELI-UTILITY-BASKET @ CHG 007 OR LATER               |
|             |             |             | X           |             |             | D350-607-547 | HELI-UTILITY-BASKET @ CHG 005 OR LATER               |
| 1           | 1           | 1           | 1           | X           |             | D350-607-511 | QUICK RELEASE BASKET MOUNTING KIT @ CHG 005 OR LATER |
|             |             |             |             |             | X           | D350-607-501 | CONVERSION KIT @ CHG 005 OR LATER                    |
|             |             |             |             | 1           | 1           | D3910-5      | X-TUBE LUG                                           |
|             |             |             |             | 1           | 1           | D3910-7      | X-TUBE LUG                                           |

(ADD)

| QTY<br>-413 | QTY<br>-415 | QTY<br>-417 | QTY<br>-419 | QTY<br>-431 | PART NUMBER  | DESCRIPTION                           |
|-------------|-------------|-------------|-------------|-------------|--------------|---------------------------------------|
| X           |             |             |             |             | D350-607-413 | HEAVY DUTY LID KIT (LONG)             |
|             | X           |             |             |             | D350-607-415 | HEAVY DUTY LID KIT (SHORT)            |
|             |             | X           |             |             | D350-607-417 | LIGHTWEIGHT LID KIT (LONG)            |
|             |             |             | X           |             | D350-607-419 | LIGHTWEIGHT LID KIT (SHORT)           |
|             |             |             |             | X           | D350-607-431 | STRUT RETROFIT KIT @ CHG 005 OR LATER |
|             |             |             |             | 1           | D3910-5      | X-TUBE LUG                            |
|             |             |             |             | 1           | D3910-7      | X-TUBE LUG                            |

(ADD)

| QTY<br>-641 | QTY<br>-611 | QTY<br>-511 | QTY<br>-431 | PART NUMBER  | DESCRIPTION                                          |
|-------------|-------------|-------------|-------------|--------------|------------------------------------------------------|
| X           |             |             |             | D350-607-641 | QUICK RELEASE LONG CARGO TUBE                        |
| 1           | X           |             |             | D350-607-611 | LONG CARGO TUBE                                      |
| 1           |             | X           |             | D350-607-511 | QUICK RELEASE BASKET MOUNTING KIT @ CHG 005 OR LATER |
|             |             |             | X           | D350-607-431 | STRUT RETROFIT KIT @ CHG 005 OR LATER                |
|             |             | 1           | 1           | D3910-5      | X-TUBE LUG                                           |
|             |             | 1           | 1           | D3910-7      | X-TUBE LUG                                           |

(ADD)

CANADA  
DEPARTMENT OF TRANSPORT  
AIRCRAFT CERTIFICATION  
BRANCH  
DAO # 01-O-01

APPROVED

BY:   
D. SHEPHERD (DE # 02)

DATE: 14.05.16  
CERT. NO.: SH94-14  
ISSUE NO.: 6

|            |                                                                                     |                                                                                                                                                                                                                                                                          |              |
|------------|-------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| A          | NEW ISSUE                                                                           | AJS                                                                                                                                                                                                                                                                      | 14.05.16     |
| REV.       | DESCRIPTION                                                                         | BY                                                                                                                                                                                                                                                                       | DATE         |
| DESIGN     | AJS                                                                                 | DART AEROSPACE LTD                                                                                                                                                                                                                                                       |              |
| DRAWN      | AJS                                                                                 | HAWKESBURY, ONTARIO, CANADA                                                                                                                                                                                                                                              |              |
| CHECKED    |  | DRAWING NO.                                                                                                                                                                                                                                                              | REV. A       |
| MFG. APPR. | N/A                                                                                 | DSI 9699                                                                                                                                                                                                                                                                 | SHEET 1 OF 2 |
| APPROVED   |  | TITLE                                                                                                                                                                                                                                                                    | SCALE        |
| DE APPR.   |  | LUG REPLACEMENT                                                                                                                                                                                                                                                          | NTS          |
| DATE       | 14.05.16                                                                            | COPYRIGHT © 2014 BY DART AEROSPACE LTD<br>THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD. |              |

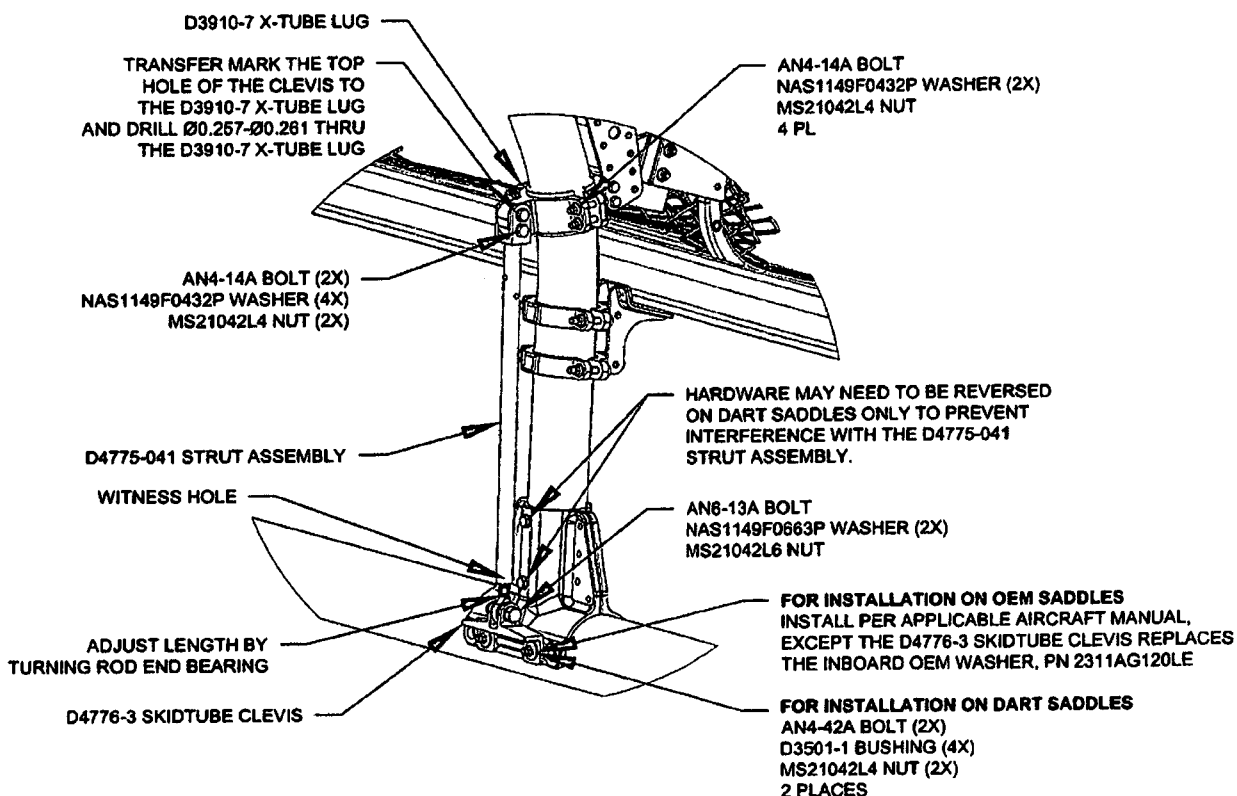
### 3.0 PROCEDURE:

Install the D350-607-501 Conversion Kit, D350-607-511 Quick Release Mounting Kit or D350-607-431 Strut retrofit kit per Installation Instructions D350-607-3 Rev. D or D350-607-4 Rev. C. While installing the Forward Strut perform the following:

3.1 Substitute the Forward Lower D3910-5 X-Tube Lug with the D3910-7 X-Tube Lug as shown in Figure 1.

3.2 Install the forward D4775-041 Strut Assembly. Transfer mark from the upper hole on the clevis of the D4775-041 Strut Assembly to the D3910-7 X-tube Lug and drill thru the lug  $\varnothing 0.257$ - $\varnothing 0.261$  as shown in Figure 1. Touch up chemical conversion coating per MIL-DTL-5541. Check the witness holes located at the bottom end of the D4775-041 Strut Assemblies to ensure that the thread from the rod end extends past the witness hole.  
**Torque MS21042L4/-4 nuts to 50-70 in-lbs (5.7-7.9 N-m). Torque MS21042L6/-6 nuts to 160-190 in-lbs (18.1-21.5 N-m).**

3.3 Complete the installation in accordance with Installation Instructions D350-607-3 Rev. D or D350-607-4 Rev. C.



**FIGURE 1: INSTALLATION OF D4775-041 FWD STRUT**

### 4.0 WEIGHT AND BALANCE:

There is no weight and balance change associated with this update.

CANADA  
DEPARTMENT OF TRANSPORT  
AIRCRAFT CERTIFICATION  
BRANCH  
DAO # 01-O-01

APPROVED  
BY: *[Signature]*  
D. SHEPHERD (DE # 02)

DATE: 14.05.16  
CERT. NO.: SH94-14  
ISSUE NO.: 6

|            |                    |                                                                                                                                                                                                                                                                                |              |
|------------|--------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| DESIGN     | AJS                | <b>DART AEROSPACE LTD</b><br>HAWKESBURY, ONTARIO, CANADA                                                                                                                                                                                                                       |              |
| DRAWN      | AJS                |                                                                                                                                                                                                                                                                                |              |
| CHECKED    | <i>[Signature]</i> | DRAWING NO.                                                                                                                                                                                                                                                                    | REV. A       |
| MFG. APPR. | N/A                | DSI 9699                                                                                                                                                                                                                                                                       | SHEET 2 OF 2 |
| APPROVED   | <i>[Signature]</i> | TITLE                                                                                                                                                                                                                                                                          | SCALE        |
| DE APPR.   | <i>[Signature]</i> | LUG REPLACEMENT                                                                                                                                                                                                                                                                | NTS          |
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## 5.0 PARTS LIST

| QTY<br>-541 | QTY<br>-543 | QTY<br>-545 | QTY<br>-547 | QTY<br>-511 | QTY<br>-501 | PART NUMBER   | DESCRIPTION                       |
|-------------|-------------|-------------|-------------|-------------|-------------|---------------|-----------------------------------|
| X           |             |             |             |             |             | D350-607-541  | HELI-UTILITY-BASKET               |
|             | X           |             |             |             |             | D350-607-543  | HELI-UTILITY-BASKET               |
|             |             | X           |             |             |             | D350-607-545  | HELI-UTILITY-BASKET               |
|             |             |             | X           |             |             | D350-607-547  | HELI-UTILITY-BASKET               |
| 1           | 1           | 1           | 1           | X           |             | D350-607-511  | QUICK RELEASE BASKET MOUNTING KIT |
|             |             |             |             |             | X           | D350-607-501  | CONVERSION KIT                    |
| 1           | 1           | 1           | 1           |             | 1           | D2690-6       | LANYARD                           |
|             |             |             |             | 8           | 8           | D3501-1       | BUSHING                           |
|             |             |             |             | 2           | 2           | D3910-3       | X-TUBE LUG                        |
|             |             |             |             | 2           | 2           | D3910-5       | X-TUBE LUG                        |
| 1           | 1           | 1           | 1           |             | 1           | D3912-041     | EYEBOLT RECEIVER ASSY             |
|             |             |             |             | 8           | 8           | D3984-030     | RUBBER EXTRUSION, X-TUBE          |
| 1           |             |             |             |             |             | D4030-041     | LONG BASKET ASSY                  |
|             | 1           |             |             |             |             | D4030-043     | LONG BASKET ASSY, LIGHTWEIGHT     |
|             |             | 1           |             |             |             | D4032-041     | SHORT BASKET ASSY                 |
|             |             |             | 1           |             |             | D4032-043     | SHORT BASKET ASSY, LIGHTWEIGHT    |
| 1           |             |             |             |             | 1           | D4917-300     | PLACARD, MAX LOAD                 |
| 1           |             |             |             |             |             | D4086-200     | PLACARD, MAX LOAD                 |
|             | 1           |             |             |             | 1           | D4917-315     | PLACARD, MAX LOAD                 |
|             | 1           |             |             |             |             | D4086-215     | PLACARD, MAX LOAD                 |
|             |             | 1           |             |             | 1           | D4917-320     | PLACARD, MAX LOAD                 |
|             |             | 1           |             |             |             | D4086-220     | PLACARD, MAX LOAD                 |
|             |             |             | 1           |             | 1           | D4917-332     | PLACARD, MAX LOAD                 |
|             |             |             | 1           |             |             | D4086-232     | PLACARD, MAX LOAD                 |
|             |             |             |             | 1           | 1           | D4148-041     | FWD X-TUBE LUG ASSY               |
|             |             |             |             | 1           | 1           | D4149-041     | AFT X-TUBE LUG ASSY               |
| 1           | 1           | 1           | 1           |             | 1           | D4150-041     | ATTACHMENT ARM ASSY               |
| 1           | 1           | 1           | 1           |             | 1           | D4151-041     | BASKET FWD HARDPOINT ASSY (LOWER) |
| 1           | 1           | 1           | 1           |             | 1           | D4151-043     | BASKET FWD HARDPOINT ASSY (UPPER) |
|             |             |             |             | 2           | 2           | D4775-041     | STRUT ASSEMBLY                    |
|             |             |             |             | 2           | 2           | D4776-3       | SKIDTUBE CLEVIS                   |
| 6           | 6           | 6           | 6           |             | 6           | AN4-13A       | BOLT                              |
|             |             |             |             | 20          | 22          | AN4-14A       | BOLT                              |
|             |             |             |             | 4           | 4           | AN4-42A       | BOLT                              |
| 1           | 1           | 1           | 1           |             | 1           | AN4C15        | BOLT                              |
| 1           | 1           | 1           | 1           |             | 1           | AN310C4       | CASTELLATED NUT                   |
|             |             |             |             | 2           | 2           | AN6-13A       | BOLT                              |
| 1           | 1           | 1           | 1           |             | 1           | MS17984-C413  | QUICK RELEASE PIN                 |
| 6           | 6           | 6           | 6           | 24          | 32          | MS21042L4     | NUT (OR MS21042-4)                |
|             |             |             |             | 2           | 2           | MS21042L6     | NUT                               |
| 1           | 1           | 1           | 1           |             | 1           | MS24665-151   | COTTER PIN                        |
| 2           | 2           | 2           | 2           |             | 2           | NAS1515H4L    | WASHER                            |
| 12          | 12          | 12          | 12          | 40          | 56          | NAS1149F0432P | WASHER                            |
| 3           | 3           | 3           | 3           |             | 3           | NAS1149C0463R | WASHER                            |
|             |             |             |             | 4           | 4           | NAS1149F0663P | WASHER                            |

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Revision: D

Date: 14.01.02

# Work Order ID 147759

June 13, 2016 11:45:42 AM

**\*147759\***

*Ship July 8*

Page 1

Item ID: D350-607-547

Accept

Revision ID:

**\*N9000040100\***

Setup Start **\*NS1\***

Item Name: QR Heli-Utility-Basket™, Short, Light Lid, Spacepod™ & Squirrel Cheek Comp., LH/RH

Stop **\*NS2\***

Start Date: 6/29/2016 Start Qty: 1.00 **\*1\***

Required Date: 7/8/2016 Req'd Qty: 1.00 **\*1\***

Cust Item ID:

Customer:

Reference:

Approvals: Process Plan: SIA Date: 6/13/16 Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

Stop **\*NR2\***

| Sequence ID/<br>Work Center ID | Operation<br>Description | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| Draw Nbr                       | Revision Nbr             |                      |         |        |              |               |               |                  |                |

D350-607-3

D

DSI9699

A

~~DAS~~  
6

JUN 15 2016

100

Document Control

~~9-59~~

0.00

**\*100\***

DC

Doc.Control -USB or Paperwork

Memo

0.00

Photocopy bluefile & type labels per PPP D350-607-547 CHG008

14-3 JUN 15 2016

140

Pick Kit

0.00

**\*140\***

Packaging

Memo

0.00

Packaging